PTO/SB/08 (12-04)

Approved for use through 7/31/2008. OMB 0851-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application of 53555 Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN (Column 1) OR SMALL ENTITY SMALL ENTITY (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE (\$) RATE (\$) FEE (\$) FEE (\$) BASIC FEE (37 CFR 1.16(8), (b), or (c)) SEARCH FEE (37 CFR 1.1604, (), or (m)) EXAMINATION FEE (37 CFR 1.16(0), (p), or (q)) TOTAL CLAIMS (37 CFR 1.16(1)) minus 20 = OR INDEPENDENT CLAIMS minus 3 -(37 CFR 1.16(h)) x If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due FEE is \$250 (\$125 for small entity) for each (37 CFR 1.16(a)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()) \* If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE (\$) ADDI-TIONAL RATE (\$) ADDL AFTER REVIOUSLY EXTRA TIONAL MENDMENT PAID FOR FEE (\$) FEE (3) Total Miraus 10 OR END Mhus OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Cotumn 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER **PRESENT** ADDI-TIONAL RATE (\$) RATE (\$) ADDL AFTER EXTRA PREVIOUSLY TIONAL MENDMEN PAID FOR FEE (T) FEE (\$) Total OR Independent (27 CFR 1.18(1)) Minus OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MELTIPLE DEPENDENT CLAIM (37 CFR 1.180)) OR TOTAL ADO'L FEE TOTAL OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20",

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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